

MULTIPLE INDEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/509089

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1		1			51					
2		1		1		1		52					
3	2			1		1		53					
4		1		1		1		54					
5				1		1		55					
6				1		1		56					
7					1	1		57					
8					1	1		58					
9					1	1		59					
10					1	1		60					
11					1	1		61					
12					1	1		62					
13					1	1		63					
14					1	1		64					
15					1	1		65					
16					1	1		66					
17					1	1		67					
18	1		1		1	1		68					
19	1		1		1	1		69					
20	1		1		1	1		70					
21	1		1		1	1		71					
22	1		1		1	1		72					
23								73					
24								74					
25								75					
26								76					
27								77					
28								78					
29								79					
30	1		1		1	1		80					
31	1		1		1	1		81					
32								82					
33								83					
34								84					
35								85					
36								86					
37								87					
38								88					
39								89					
40								90					
41								91					
42								92					
43								93					
44								94					
45								95					
46								96					
47								97					
48								98					
49								99					
50								100					
TOTAL IND.	41		14		5			TOTAL IND.					
TOTAL DEP.	30	←	27	←	27	←		TOTAL DEP.	←	←	←	←	
TOTAL CLAIMS	71		31		32			TOTAL CLAIMS					